



http://www

Quality Times

January-March, 2015

Share your Ideas

Do you have an idea how to improve quality at DHSS? The State of Missouri recognizes that the ideas of state employees are fundamental to the continuous improvement of services.

The State Employee Suggestion Program, Missouri Relies on Everyone (MoRE), provides state employees with an opportunity to share their ideas, suggestions or recommendations. The Program also provides a way to identify, recognize and reward the ingenuity and commitment to excellence of state employees for their suggestions.

Suggested improvements can include but are not limited to:

- improved service to customers,
- reduced cost or generated revenue,
- process improvement,
- improved working conditions and/or safety
- improved employee relations

Submit your ideas for quality improvement to:

[http://www.more.oa.mo.gov/\(S\(2jxz2p4553dagamwksannumt\)\)/SuggestionForm.aspx](http://www.more.oa.mo.gov/(S(2jxz2p4553dagamwksannumt))/SuggestionForm.aspx)

Have you heard?

DHSS IS APPLYING FOR NATIONAL ACCREDITATION.

Accreditation through the Public Health Accreditation Board (PHAB) can help a health department achieve performance excellence. The standards and measures are the framework for evaluating a health department's processes and services, their outcomes, and progress toward specific goals and objectives.

Accreditation provides a framework for DHSS to identify performance improvement opportunities, to improve management, develop leadership, and improve relationships with partners. Going through the process has allowed us to identify strengths and areas for improvement, strengthen internal and external partnerships, prioritize health issues, stimulate continuous quality improvement and performance management in our daily practice. You can find out more about PHAB Accreditation here:

<http://www.phaboard.org/>

DHSS submitted all documentation to PHAB in October 2014. Next steps will be to schedule a site visit with PHAB to review the documentation and processes onsite.

What are DHSS' Values?

When used properly, mission, vision and values statements can be very powerful tools. They are inspiring words developed by leaders to clearly and concisely convey the purpose, direction and driving forces of the organization. By creating clear, meaningful and reflective statements, we can powerfully communicate our intentions and motivate and inspire staff to ensure they understand the objectives of the organization, to make consistent everyday decisions and achieve buy-in to new directions.

Values are a set of beliefs that govern the actions and choices of DHSS staff. They should also describe how we carry out the vision and mission of DHSS.

It's not enough to feel passionate about what we do, we also have to consciously understand the framework of what drives DHSS. This is essential in order to effectively communicate those drivers to the diverse group of people that we serve.

Value statements communicate to our constituents, the public, staff, leadership, and contractors what is important to DHSS; they inspire and help foster trust among employees and leadership; and they set the standards of behavior and provide a framework for making tough decisions.

So, what is the difference between mission, vision and values?

Vision Statement – The Vision statement should be a statement of *why we are here*.

Mission Statement - The Mission statement is a concise statement of what DHSS does.

Values Statement - The Values statement should define *who we are*.

DHSS' Vision

Healthy Missourians for Life

DHSS' Mission

To be the Leader in Promoting, Protecting and Partnering for Health

DHSS' Value Statements

Accountability – We accept responsibility for how we plan and perform our work, and we recognize the critical importance of using state resources wisely as stewards of the public trust.

Collaboration – We partner with public and private entities to improve health for all Missourians and protect seniors and persons with disabilities.

Commitment – We maintain a workforce composed of highly skilled and motivated individuals, and we celebrate the enormously positive difference they make in the lives of Missourians every day.

Communication – We remain closely connected to the citizens we serve through responsive and timely communication, and we deeply value our role as a trusted source of information regarding health and senior issues.

Diversity – We recognize and respect the benefits of diversity among staff and those that we serve, and we work to make our department a reflection of the richly diverse community that is the state of Missouri.

Excellence – We strive to deliver high quality services through continuous quality improvement efforts in order to exceed customer expectations.

Integrity – We perform our job responsibilities in a highly principled manner by honoring our commitments, maintaining our ethics, and always putting the public good above personal gain.

Respect – We deliver services to Missourians in a manner that is sensitive to their unique needs and circumstances.

QI Tool

Spending adequate time in each phase of the Plan Do Study Act (PDSA) cycle is important to having a smooth and meaningful quality improvement process. The elements discussed include a process based on a scientific method, and help ensure that improvement efforts are conducted in a way that will maximize success. Its simplicity comes from the systematic, straightforward and flexible approach that it offers.

Assemble the Team: Before beginning the PDSA process, it is important to assemble the team that will participate and develop a communications plan. To begin, designate a team leader and team members, and address the following questions:

- Do we have the right people (i.e., those who are directly involved with the area needing improvement)?
- Does the team need training?
- Who will facilitate the team and process?

Plan: The purpose of this phase is to investigate the current situation, fully understand the nature of any problem to be solved, and develop potential solutions to the problem that will be tested. During this step you will:

- Identify and prioritize quality improvement opportunities.
- Develop an AIM statement.
- Describe the current process.
- Collect data on the current process.
- Identify all possible causes of the problem.
- Identify potential improvements.
- Develop an improvement theory.
- Develop an action plan.

Do: the purpose of this phase is to implement the action plan. During this phase you will:

- Implement the improvement.
- Collect and document the data.
- Document problems, lessons learned and knowledge gained.

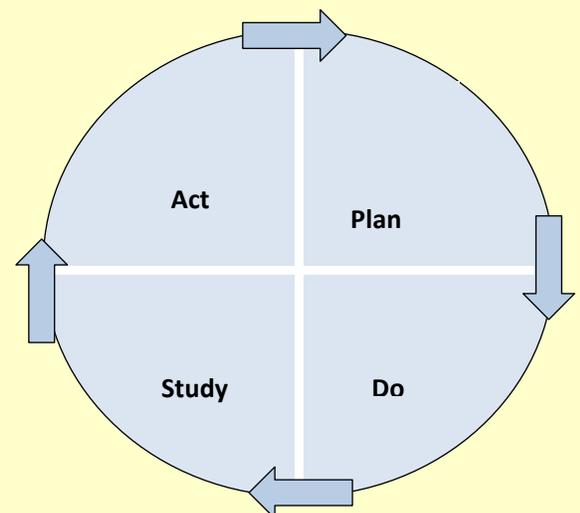
Check/Study: This phase involves analyzing the effect of the intervention. Compare new data to baseline data to determine whether an improvement was achieved, and whether the measures in the AIM statement were met. During this phase you will:

- Reflect on analysis and compare results against objectives.
- Document lessons learned and knowledge gained.

Act: This phase marks the culmination of the planning, testing, and analysis regarding whether the desired improvement was achieved and the purpose is to act upon what has been learned. During this phase you will:

- Adopt the improvement if the goal is met.
- Adapt the improvement if the goal is not met but progress is being made.
- Abandon the improvement if positive results are not noticed.

The Plan-Do-Check-ACT (PDCA) cycle has been embraced as an excellent foundation for, and foray into, quality improvement for public health departments, as it is both simple and powerful.



QI Success Stories

Division of Senior and Disability Services

The Central Registry Unit maintains the statewide, toll-free hotline for reports of alleged abuse, neglect, and financial exploitation of persons age 60 and older, and adults with disabilities between 18 and 59. In May 2012, there were numerous complaints from the public and other state agencies regarding frustrations when trying to reach the hotline. Calls were dropped, forcing customers to call back repeatedly, and many calls were abandoned. What did it take to decrease the speed to answer calls from 30-45 min to 2.5 min? How were hotline staff able to increase the calls they could handle from 30% to almost 90%? Read about it here:

<http://dhssnet/qualityimprovement/pdf/crusuccessstory.pdf>

Division of Administration

Have you ever tried to enter contract monitoring information into the Division of Administration's database? If so, you may have noticed changes in the process. Read how those changes have resulted in less errors and more information available:

<http://dhssnet/qualityimprovement/pdf/contractmonitoringsuccessstory.pdf>

Division of Regulation and Licensure

Federal regulations mandate that hospital surveyors submit a statement of deficiencies to a hospital 10 days after a survey ends. Two years ago surveyors in the Bureau of Hospital Standards missed that deadline. Learn what processes they put in place to not only meet but exceed the 10 day requirement:

<http://dhssnet/qualityimprovement/pdf/hospitalstandardssuccessstoryl.pdf>

Resources:

DHSS Quality Improvement Policy: 15.11 and 15.11A

DHSS Quality Improvement Plan:

<http://dhssnet/qualityimprovement/pdf/qualityimprovementplan.pdf>

More information can be found on the "Move the Needle" Intranet webpage:

<http://dhssnet/qualityimprovement/index.php>

Did you know DHSS has a Quality Improvement Committee (QIC)?

This committee, made up of representatives from across the Department is responsible for assisting the Department in improving effectiveness, efficiency, outputs and outcomes by evaluating DHSS key programs, processes and services. The QIC also assists in establishing a Culture of Quality in the Department and develops a department-wide QI Plan.

In future newsletters you will learn how the QIC goals have lead the Department in improving the knowledge and utilization of Quality Improvement in the Department.

